

Form

North Dakota Office of State Tax Commissioner

**ND-1 Individual income tax return 2002**

Please type or print in black or blue ink. Enter one letter or number in each box. Fill in circles completely.

Your social security number

Spouse's social security number

► Fill in only if applicable: Amended
(See page 9) Extension

► **Fiscal year filer ONLY:** (See page 9)
Enter fiscal year beginning date

Enter fiscal year ending date

- A. Filing status used on federal return:** (Fill in only one)
- | | |
|---|--|
| 1. Single | 4. Head of household |
| 2. Married filing joint return | 5. Qualifying widow(er) with dependent child |
| 3. Married filing separate return:
Spouse's name | |

► Were you required to pay estimated federal income tax for 2002? (See page 9) Yes No

- B. Residency status:** (Fill in only one)
- | | | |
|--------------------------|---|--|
| 1. Full-year resident | C. School district code
(See page 17) | D. Income source code
(See page 9) |
| 2. Full-year nonresident | | |
| 3. Part-year resident | | |

Dept. use only: Composite return ☐ (CF)

US Dollars

E. Federal adjusted gross income from line 35 of Form 1040, line 21 of Form 1040A, line 4 of Form 1040EZ, or line I of TeleFile Tax Record _____ (SX)

1. Federal taxable income from line 41 of Form 1040, line 27 of Form 1040A, line 6 of Form 1040EZ, or line K of TeleFile Tax Record (If zero, see page 9 of instructions) _____ (SS) 1

Additions

2. Lump-sum distribution from Federal Form 4972 _____ (NA) 2

3. Loss from pass-through entity subject to North Dakota's financial institution tax (Attach statement from entity) --- (NB) 3

4. Total additions. Add lines 2 and 3 _____ 4

5. Add lines 1 and 4 _____ 5

Subtractions

6. Interest from U.S. obligations (Attach supporting statement) _____ (SN) 6

7. Net long-term capital gain exclusion (From worksheet on page 10 of instructions) _____ (NC) 7

8. Exempt income of a Native American _____ (S4) 8

9. Benefits received from U.S. Railroad Retirement Board (Attach copy of Form RRB-1099/RRB-1099-R, or both) __ (S5) 9

10. Income from pass-through entity subject to North Dakota's financial institution tax (Attach statement from entity) --- (S6) 10

11. Renaissance zone income exemption (Attach Schedule RZ) _____ (S7) 11

12. Total subtractions. Add lines 6 through 11 _____ 12

13. North Dakota taxable income. Subtract line 12 from line 5. If less than zero, enter 0 (ND) 13

14. Tax: ● If **full-year resident**, enter amount from Tax Table on page 18 of instructions. If you have farm income, see page 11 of instructions. } (SB) 14
● If **part-year resident** or **full-year nonresident**, enter amount from Schedule ND-1NR, line 22.

Fillable

North Dakota Office of State Tax Commissioner
2002 Form ND-1, page 2



US Dollars

15. Enter your **tax** from line 14 of page 1 15

Credits

16. Credit for income tax paid to another state
(Attach Schedule ND-ICR) (SD) 16

17. Family member care credit (Attach Schedule FC) (S2) 17

18. Renaissance zone credit (Attach Schedule RZ) (S3) 18

19. Agricultural commodity processing facility investment credit
(Attach investment reporting form) (NE) 19

20. Credit for unused federal credit for prior year minimum tax
(From worksheet on page 11 of instructions) (NF) 20

21. Qualified business seed capital investment credit
(Attach investment reporting form) (NG) 21

22. **Net tax liability.** Subtract lines 16 through 21 from line 15. **If less than zero, enter 0** (SE) 22

Withholding and/or tax already paid

23. North Dakota withholding (Attach supporting W-2s and 1099s) (SF) 23

24. Estimated tax paid plus overpayment applied from 2001 return (S&) 24

25. Total payments. Add lines 23 and 24 25
● If line 25 is MORE than line 22, complete lines 26 through 30.
● If line 25 is LESS than line 22, complete lines 31 through 34.

Refund

26. **Overpayment** - If line 25 is MORE than line 22, subtract line 22 from line 25 and enter result;
otherwise, go to line 31. **If result is less than \$5.00, enter 0** (SG) 26

27. Amount of line 26 that you want applied to your 2003
estimated tax (SQ) 27

28. Amount of line 26 that you wish to contribute to the Watchable
Wildlife Fund (SP) 28

29. Amount of line 26 that you wish to contribute to the Trees
For ND Program Trust Fund (SW) 29

30. **Refund.** Subtract lines 27 through 29 from line 26. **If result is less than \$5.00, enter 0** (SR) 30

To **direct deposit** your
refund, complete items a, b,
and c. (See page 12.)
a. Routing number:
b. Account number:

c. Type of account:
Checking
Savings

Tax Due

31. **Tax due** - If line 25 is less than line 22, subtract line 25 from line 22 and enter result.
If result is less than \$5.00, enter 0 (SZ) 31

32. If there is a tax due on line 31, amount that you wish to
contribute to the Watchable Wildlife Fund (SU) 32

33. If there is a tax due on line 31, amount that you wish to
contribute to the Trees For ND Program Trust Fund (SY) 33

34. **Balance due.** Add lines 31, 32, 33, and, if applicable, line 35.
Pay to: **North Dakota State Tax Commissioner** 34

35. Interest on underpaid estimated tax from Form 400-UT (SO) 35

I declare under the penalties of North Dakota Century Code §12.1-11-02, which provides for a Class A misdemeanor for making a false statement in a governmental matter, that this return, including any accompanying schedules and statements, has been examined by me, and to the best of my knowledge and belief, is a true, correct, and complete return. **Privacy Act** - see inside front cover of booklet.

Your signature	Date	Your daytime phone number
Spouse's signature	Date	
Signature of paid preparer	EIN/SSN/PTIN	Date

Tax Department use only

OPR ☐

▶ **Attach a copy of your 2002 federal income tax return.**

▶ **Mail to: Office of State Tax Commissioner, 600 E. Boulevard Ave.,
Dept. 127, Bismarck, ND 58505-0550**